

AMENDMENTS TO THE CLAIMS

Claim 1 (Currently amended): A method of increasing the efficacy of a gastric H+/K+-ATPase pump inhibitor (PPI) in a mammal in a human in need of a PPI, said method comprising:

administering to said mammal human an effective amount of one or more agents selected from the group consisting of a pentagastrin, a gastrin, and a gastrin analogue, in conjunction with said gastric proton pump inhibitor whereby the efficiency of said gastric proton pump inhibitor is increased.

Claim 2 (Previously presented): The method of claim 1, wherein said one or more agents is pentagastrin.

Claim 3 (Currently amended): The method of claim 2, wherein said mammal human is a mammal human diagnosed with a pathology characterized by excess gastric acid secretion.

Claim 4 (Original): The method of claim 3, wherein said pathology is selected from the group consisting of Zollinger/Ellison syndrome (ZES), gastroesophageal reflux disease (GERD), peptic ulcer disease, atrophic gastritis, esophagitis, and idiopathic gastric acid hypersecretion.

Claim 5 (Canceled).

Claim 6 (Original): The method of claim 2, wherein said administering comprises administering said pentagastrin prior to administration of said gastric proton pump inhibitor.

Claim 7 (Original): The method of claim 2, wherein said administering comprises administering said pentagastrin simultaneously to administration of said gastric proton pump inhibitor.

Claim 8 (Original): The method of claim 2, wherein said proton pump inhibitor is selected from the group consisting of rabeprazole, omeprazole, lansoprazole, pantoprazole, and cogeners or racemic mixtures thereof.

Claim 9 (Original): The method of claim 2, wherein said pentagastrin is administered by subcutaneous injection.

Claim 10 (Original): The method of claim 2, wherein said pentagastrin is administered in a dosage ranging from about 0.1 mg/kg/hr to about 10 mg/kg/hr.

Claims 11-19 (Canceled).

Claim 20 (Previously presented): A kit for the treatment of a pathology characterized by excess gastric acid secretion, said kit comprising:

a container containing a proton pump inhibitor (PPI); and

a container containing one or more agents selected from the group consisting of a pentagastrin, gastrin, and a gastrin analogue.

Claim 21 (Previously presented): The kit of claim 20, wherein said one or more agents is pentagastrin.

Claim 22 (Original): The kit of claim 21, wherein said proton pump inhibitor is selected from the group consisting of rabeprazole, omeprazole, lansoprazole, pantoprazole, and ~~or~~-cogeners and racemic mixtures thereof.

Claim 23 (Original): The kit of claim 21, wherein said PPI is present in a pharmaceutically acceptable excipient or diluent.

Claim 24 (Original): The kit of claim 21, wherein said PPI is dehydrated.

Claim 25 (Original): The kit of claim 21, wherein said pentagastrin is present in a pharmaceutically acceptable excipient or diluent.

Claim 26 (Original): The kit of claim 21, wherein said pentagastrin is dehydrated.

Claim 27 (Original): The kit of claim 21, further comprising an antibiotic.

Claim 28 (Original): The kit of claim 27, wherein said antibiotic is selected from the group consisting of penicillin based antibiotics, tetracyclines, macrolides, cephalosporins, and fluoroguinolones.

Claim 29 (Original): The kit of claim 21, wherein said kit further comprises instructional materials describing the use of pentagastrin, gastrin, or an analogue thereof in conjunction with a PPI to reduce gastric acid secretion.

Claim 30 (cancelled).

Claim 31 (Previously presented): The kit of claim 24, wherein said one or more agents is pentagastrin.